

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LINDSEY GRAHAM 2016

A. Full Name (Last, First, Middle Initial)

ANNE NORWOOD

Mailing Address 501 CAMELLIA CIR.

City
FLORENCE

State Zip Code
SC 29501-5771

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RETAIL

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17.B76260

Date of Receipt

MM / DD / YYYY
11 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

REATTRIBUTION FROM SPOUSE

B. Full Name (Last, First, Middle Initial)

TIMOTHY NORWOOD

Mailing Address 501 CAMELLIA CIRCLE

City
FLORENCE

State Zip Code
SC 29501-5771

FEC ID number of contributing
federal political committee.

C

Name of Employer
VICTORS

Occupation
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.B76261

Date of Receipt

MM / DD / YYYY
11 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

-1000.00

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

C. Full Name (Last, First, Middle Initial)

TIMOTHY NORWOOD

Mailing Address 501 CAMELLIA CIRCLE

City
FLORENCE

State Zip Code
SC 29501-5771

FEC ID number of contributing
federal political committee.

C

Name of Employer
VICTORS

Occupation
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.75218

Date of Receipt

MM / DD / YYYY
09 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

[MEMO ITEM]

ATTRIBUTION TO PARTNERS REQUESTED

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....